



## **DoD HIV/AIDS Prevention Program Status Report:**

### **Uganda**



## **BACKGROUND**

### **Introduction/General Information**

The population of Uganda is estimated to range between 21 million and 24.6 million, with average life expectancy estimated to be 44 years, down significantly due to the HIV/AIDS epidemic. English is the official language of Uganda, and the literacy rate is estimated at 62%, disproportionately distributed between males and females. Uganda is described as a country with substantial natural resources and a developing economy. Agriculture continues to employ 80% of the workforce and per capita income estimates range from \$320 to \$1,200.

### **Country HIV/AIDS Statistics and Risk Factors**

HIV/AIDS prevalence in Uganda is estimated to range from 5% to 6.1% of the adult population with either HIV infection or AIDS. The number of people estimated to be living with HIV in Uganda ranges from 600,000 to 1.1 million. Identified significant risk factors include a high prevalence of sexually transmitted infections (STIs) and high-risk heterosexual contact with multiple partners.

### **Military HIV/AIDS Information**

Ugandan military size is estimated at approximately 40,000. Ugandan People's Defense Forces (UPDF) have not performed

systematic HIV screening of its personnel, thus prevalence statistics are unavailable.

## **PROPOSED PROGRAM**

The UPDF presented DHAPP with a plan titled *Strengthening HIV/AIDS Prevention, Care and Support in the Uganda People's Defense Forces*. Funding and logistical support was requested for several components, including an initiative to expand and enhance its prevention counseling capacity and establish 12 voluntary counseling and testing (VCT) centers, a plan to create recreational facilities in existing Post-Test Clubs, enhanced HIV/AIDS training for nurses and healthcare providers, and funding assistance to allow ongoing supervision for the program.

## **PROGRAM RESPONSE**

### **Military-to-Military**

During the summer of 2001, DHAPP staff visited Kampala for the purpose of an in-country assessment. DHAPP provided funding to the Defense Attaché Office (DAO) at the US Embassy in Kampala to begin supporting the UPDF efforts. In addition, office support equipment has been provided directly to the UPDF to enable the development of an infrastructure to establish an internal HIV/AIDS program. In August 2002, DHAPP staff traveled to Uganda to provide logistical assistance to the DAO in

support of HIV/AIDS prevention efforts by the UPDF. In November 2002, DHAPP program staff assisted in hiring a foreign service national to coordinate administration of the HIV/AIDS program in Uganda. This was an important step forward and will help keep HIV/AIDS prevention efforts moving. During this same visit, computer and audiovisual equipment purchased by DHAPP for use in the UPDF HIV/AIDS program was formally transferred to them.

### **Clinical Provider Training**

Two senior HIV clinicians attended the 4-week *Military International HIC Training Program* course in San Diego, California. Focused areas of study included clinical treatment and management, HIV exposure prophylaxis, epidemiological database set-up and research methodology, prevention of mother-to-child transmission, laboratory diagnostic requirements, and protocols.

## **PROGRAM IMPACT**

### **Peer Educators and Master Trainers**

Twenty-four UPDF personnel have completed The AIDS Support Organization training, which includes pretest and posttest counseling modules. The UPDF plans to have a total of 60 counselors trained by October 2003.

### **Number of Troops Trained**

To date 50,000 individuals have received HIV/AIDS prevention training, which includes UPDF troops and their spouses.

### **Potential Number of Troops Affected**

It is anticipated that virtually all active-duty UPDF personnel will be reached through a combination of peer education, VCT, and mass awareness campaigns.

### **Voluntary Counseling and Testing (VCT)**

The UPDF is in the process of converting seven pre-fabricated structures into VCT centers, which will be located at bases and camps throughout the country. These centers are expected to open in November 2003.

### **Mass Awareness**

None at this time.